## **Youth Volunteer Corps Registration**



Must be completed by parent/guardian if under age 18.

Please return to Evan Owen
1310 SW Avery Park Dr Corvallis, OR 97333.



Fax: 541-754-1701

If you have questions please contact Evan at **541-766-6467** or via Email: **Evan.Owen@corvallisoregon.gov** 

Please fill out the following information with the youth's and guardian's contact information, so that Corvallis Parks and Recreation YVC can relay information about updates, changes, or new opportunities.

Participant Name		4ge	Grade
School	Allergies/Special Needs		
Participant Email			
Preferred Phone	Parent/Guardian name		
Emergency Phone	Parent/Guardian Email		
Home Address			
Preferred means of contact			
EVENTS you are volunteering for:			
*By signing the liability release, this and other YVC events only	, I understand that the contact information r	may be used by	/ YVC for the purposes of
18 years of age. I understand and ass release and forever discharge any clai	<b>uired)</b> I hereby certify that I am 18 or I am the pasume the risks of participation in this program. For m im for injury or damage, and to hold harmless the Cit benses, including attorney's fees, resulting directly or	nyself, my heirs an ty of Corvallis, its o	d assigns I agree to waive, officers, agents, and employees
Parent/Guardian Signature		Date _	
while participating in YVC. I release Y	er Corps of Corvallis and the YVC to use photograph VC of Corvallis Parks and Recreation, and the YVC aive the right to all negatives, photos, tapes, and rep /or videos	from any and all li	abilities arising from the use of
Parent/Guardian Signature		Date _	
the work site. I hereby give permission	one other than the Youth Volunteer's parent(s) or gua n for a Youth Volunteer Corps team leader from Park n/daughter to and from the Youth Volunteer work site	s and Recreation	or a school district parent
Parent/Guardian Signature		Date _	

